## AL DOCUMENT

STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED

2:35 PM

2024 Oct 28



RETURN TO: HODGES & DAVIS, P.C. Attorneys at Law 8700 Broadway Merrillville, IN 46410

## RELEASE OF HOSPITAL LIEN .

This is to certify that a certain Hospital Lien by THE METHODIST HOSPITALS, INC., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against KENISHA WILLIAMS,

represented by the Sworn Statement Of Notice Of Intention 16 Hold Hospital Lien which was executed on the 23nd day of December, 2022, and recorded on the 26th day of January, 2023 (as instrument number 2023-004132), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of KENISHA WILLIAMS, in the amount of Nine Thousand Seven Hundred Forty-Eight and 02/100 (89748.02), Dollars, is released this 16 40 at 0.00 at 0
In the event full payment of the hospital charges has not been received, The Methodist Hospitals, Inc. specifically reserves all rights it may have to collect the balance due.
THE METAJODIST HOSPITALS, INC.— BY: Debra Bergonia
STATE OF INDIANA )
COUNTY OF LAKE ) SS:
Debra Bergonia, being the Manager Credit and Collections for the Northlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.  Debra Bergonia
Subscribed and sworn to before me, a Notary Public, this 21 day of 0000, 2024.
My Commission Expires:  My Commission Number: No 0 2 4702
Mach 24, 2007  USASTONE Notary Public Seal Lake Courty - State of Indiana Commission Number RP06/24/00. My Commission Engines May 24, 2007
I affirm, under the penalties for perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law.
This instrument Prepared By:  Laura B. Frost, Attorney at Law 8700 Broadway, Merrillville, IN 46410

7777-327106

AMOUNT CASH CHECK #\_ OVERAGE COPY NON-COM. CLERK